

Seguin Police Youth Scholarship Application

STUDENT INFORMATION

Last Name: _____ First Name: _____

Address: _____ City, State _____ Zip _____

Father's Name _____ Current Occupation _____

Mother's Name _____ Current Occupation _____

You now live with: Both parents ____ Mother Only ____ Father Only ____ Other (explain) _____

How do you plan to finance your education: _____

ACADEMIC INFORMATION

Rank in your class: _____ out of _____ SAT _____ ACT _____

Colleges or Technical schools to which you have applied: _____ Have you been accepted: _____

_____ Yes _____ No _____

_____ Yes _____ No _____

_____ Yes _____ No _____

List the Major Field of study you will pursue _____

SEGUIN HIGH SCHOOL, COMMUNITY & EXTRA CURRICULAR ACTIVITIES

List School Activities:

List Community Activities:

Positions of Responsibility and Leadership:

Honors & Awards:

I ATTEST THAT ALL THE ABOVE INFORMATION IS TRUE _____
Student Signature Date

Attach the following items: (Use additional pages if necessary)

_____ A written essay expressing how the DARE Program helped you.

_____ A copy of your H.S. transcript including GPA.

_____ Two (2) letters of recommendation from: Citizen of Seguin, Teachers, Counselor, or Principal.

_____ A resume.